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<b>CHANGE OF CORRESPONDENCE ADDRESS</b>  <b>Application</b>  Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	10/646,436
	Filing Date	08/21/2003
	First Named Inventor	Gleave et al.
	Art Unit	1635
	Examiner Name	Kimberly Chong
	Attorney Docket Number	UBC.P-030

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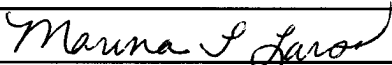
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☐ Assignee of record of the entire interest.  
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☒ Attorney or agent of record. Registration Number

☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number

Signature 

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NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☐ \*Total of  forms are submitted.

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